FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

1	JAL REPORT 1996	Secretar	B. Mortham by of State CORPORATIONS		
DOCU 1. Corporation	MENT # P9200	00003331 (5)			
RAYM	OND S. KULZICK, C.P.A.,	P.A.			
		• • •		I JOSH IGON HAT JENE HERH BONN BANN	aa an aa an aa aa ahaa ahaa ahaa ahaa ahaa ahaa
Principal Place	o of Business	Mailing Address			
16310 SW 88 COURT MIAMI FL 33157 US		16310 SW 88 COURT MIAMI FL 33157 US			
		03		3. Date Incorporated or Qualified	3a. Date of Last Report
2. Principal Pi	ace of Business	2a. Mailing Address		11/04/1992 4. FEI Number	07/03/1995 Applied For
21		26		65-0372183	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stati	9	Orty & State		6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	28	Country	Trust Fund Contribution	Added to Fees
24	25	}	30	8. This corporation has liability for i	ntangible tax under s. 199.032,
	9. Name and Address of Curr			10. Name and Address of New R	
16310 8	K, raymond s SW 88 Court EL 33157		83	ess (P.O. Box Number is Not Acceptab	
			84 City		FL 85 Zip Code
or register	ed agent, or both, in the State of Fic th, and accept the obligations of, So Signature, typed or protect name of any second	onda Steh change was authorized schon 607.0505, Florida Statutes.	by the corporation's boards against Agent agratum repairs 13.	ation submits this statement for the pur of directors. Thereby accept the appo of characteristics. ADDITIONS/CHANGES TO OFFI	pintment as registered agent. I am
TITLE	D	☐ DELETE	1 1 TITLE	ADDITIONATION AND TO OFFI	Change Addition
NAME STREET ADDRESS CITY-ST-ZIP	KULZICK, RAYMOND S 16310 SW 88 COURT MIAM! FL		12 NAME 13 STREET ADDRESS 14 CITY+ST-ZIP		
TITLE NAME STREET ADDRESS		☐ DELETE	2 1 THEF 2 2 NAME 2 3 STREET ADDRESS		Change Addition
CITY-ST-ZIP TITLE		DELETE	2 4 City ST-ZiP 3 1 HILE		Change Addition
NAME			3 2 NAME		C Our ide C van (00)
STREET ADDRESS			3.3 STHEET ADDRESS		
CITY - ST - ZIP			3.4 CITY - \$1 - ZIP		
TITLE	,	DELETE	4 1 DTLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4 4 CITY ST-7-P 5 1 T-TLE		Change Cl Addison
NAME			5.2 NAME		Change Addition
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4.CITY - ST - ZIP		
THILE		DELETE	6 1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADVIRESS		

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CHY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k), Florida Statutes, I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an 40 ichmed with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/96 LAUS 2332280

CR2E034 (12/95)